

IN THE SPECIFICATION:

Please amend the specification as follows:

In column 1, line 4, of the '648 patent, before "BACKGROUND OF THE INVENTION," please insert the following:

CROSS REFERENCE TO RELATED APPLICATIONS

This application is a continuation of reissue Application No. 08/889,825, filed on July 8, 1997, now U.S. Patent No. RE37,315, which is a reissue of U.S. Patent No. 5,431,648 based on Application No. 08/232,190, filed May 3, 1994.

Please amend the paragraph beginning at column 4, line 4, of the '648 patent as follows:

There is shown schematically in FIG. 5 the longitudinal section of the catheter provided with a radiating antenna according to this invention, once it has been introduced into the bladder, in an operative condition. The catheter, carrying the radiating antenna therewithin, is introduced into bladder 32 through the urethra, in such a way that the rear end of protective metal cylinder 26 is located approximately at the bladder neck, in the transition area between prostata 33 and bladder 32, while simultaneously taking care that the catheter front end does not subject the bladder internal wall to any pressure. Once the catheter has been introduced into the bladder in such a way, one actuates the supply pump of conditioning liquid 2 preferably comprising a solution of a selective [citotoxicity] cytotoxicity substance, which is accordingly forced to circulate through the bladder coming out from opening 3 and going back through opening 4, or viceversa, along side channel 5 which carries the power supply cables of thermocouples 6, 6', 6" therewithin. The liquid forced circulation, provided by the variable flowrate supply pump, suitably combined with an outer balancing and degassing chamber, allows the volume of liquid within the bladder to be balanced at will, in such a way as to compensate the pathological or physiological urine production, while

thoroughly ejecting the gases generated or unwillingly introduced in circulation, out of the bladder, in order to prevent irradiation non-uniformities which would otherwise be caused by coexistence of anisotropic media. Once bladder 32 has been completely filled with conditioning liquid 2, ballon 7 is inflated by introducing a fluid, which may be a gas but it is preferably a liquid, along side channel 8 and through the end opening 9 thereof; ballon 7 inflated as mentioned above, pushes then against outer thermocouples 6, 6', 6" power supply cables thereby moving said thermocouples into tangential engagement against bladder wall 32 in different positions, in order to detect the temperatures prevailing therein as caused by irradiation generated by antenna 1. The possibility of changing the location and the number of the outer thermocouples, enables the thermocouples to be positioned at will, on the bladder wall, or in any [case] place of the body organ to be treated, while being able to individually check the temperatures in the various locations. The inflated ballon 7 protects the bladder neck wall from an excess heat caused by the proximity of the radiating antenna, and in the meantime it prevents the catheter from being accidentally displaced or from coming out through the bladder neck.